

1. Name of the person: [REDACTED]
2. Date of birth: [REDACTED]
3. Place of birth: [REDACTED]
4. Nationality: [REDACTED]
5. Sex: [REDACTED]
6. Height: [REDACTED]
7. Weight: [REDACTED]
8. Eye color: [REDACTED]
9. Hair color: [REDACTED]
10. Hair style: [REDACTED]
11. Facial features: [REDACTED]
12. Distinguishing marks: [REDACTED]
13. Current address: [REDACTED]
14. Previous addresses: [REDACTED]
15. Education: [REDACTED]
16. Occupation: [REDACTED]
17. Marital status: [REDACTED]
18. Children: [REDACTED]
19. Parents: [REDACTED]
20. Siblings: [REDACTED]
21. Social contacts: [REDACTED]
22. Hobbies: [REDACTED]
23. Travel history: [REDACTED]
24. Vehicle records: [REDACTED]
25. Financial records: [REDACTED]
26. Criminal record: [REDACTED]
27. Mental health history: [REDACTED]
28. Substance use history: [REDACTED]
29. Medical history: [REDACTED]
30. Other relevant information: [REDACTED]

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A	Appeal
O	Objected

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